

The drum circle project: A qualitative study with at-risk youth in a school setting

Projet de cercle de tambours : étude qualitative auprès de jeunes à risque en milieu scolaire

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Abstract

This paper describes a qualitative study that explores possible therapeutic benefits from the implementation of a music therapy drumming circle with at-risk youth in an alternative high school. The study was conducted over a 12-week period with nine students ranging in age from 16-17. Data consisted of questionnaires completed by each student, videotapes of 6 of the 12 sessions, and observations of each group carried out by an educational psychology researcher. It is hoped that the results will contribute to the development of this model for music therapists by 1) contributing to our understanding of how this process can work; 2) informing our understanding of therapeutic benefits and potential; 3) informing practice within school settings by music therapists.

Keywords:

Experiential education, at-risk youth, group drumming, music therapy, schools, drum circles, alternative education, qualitative research

Résumé

Cet article décrit une étude qualitative qui explore les bienfaits pouvant résulter de la création d'un cercle de tambours à l'intérieur d'un cadre musicothérapeutique, auprès de jeunes à risque, dans une école secondaire alternative. L'étude, menée sur un groupe de 9 participants âgés entre 16 à 17 ans, s'échelonne sur une période de 12 semaines. Les

données ont été recueillies par le biais de questionnaires complétés par les participants, d'enregistrements vidéo de 6 des 12 rencontres et des observations colligées par un chercheur en psychologie de l'éducation. Nous souhaitons que les résultats contribuent au développement de ce modèle pour les musicothérapeutes 1) en développant notre compréhension du fonctionnement de ce processus; 2) en nous informant des bienfaits et du potentiel thérapeutique de cette approche; 3) en documentant la pratique de musicothérapeutes en milieu scolaire.

Mots clés : éducation expérientielle, jeunes à risque, jeu de tambours en groupe, musicothérapie, écoles, cercle de tambours, éducation alternative, recherche qualitative

INTRODUCTION

Youth are 'at-risk' for many things in today's culture, and the term 'at-risk youth' is a common one. Educators define the term as referring to those young people who are at-risk for dropping out of school (Druian & Butler, 1987). Mental Health professionals focus on depression, suicide and drug addiction as the areas that many youth face as serious risks (Dr. Lois M. Colle, Lecture, 2004, McGill University). Often, dropping out of school is linked to an increase in risk for health issues, and vice versa, thus compounding the number of areas for which these youth are at-risk (Frudenberg & Ruglis, 2007).

Effective Schooling Practices

For over 20 years, educators have identified experiential learning as successful with at-risk youth. Wehlage (1983) found that alienation from the school, daily reinforced by teachers and administrators, is one of the most important threats to the retention of at-risk youth. He also found that the most important curricular characteristic of effective programs for at-risk students is the experiential curriculum. "We believe there is sufficient evidence about the effects of experiential education to argue for it as an essential component of and program for marginal students" (p. 38).

Wehlage (1983) outlined the criteria for experiential education:

- Should offer "optimal challenge with manageable conflict"

- Should provide a young person an opportunity to exercise initiative and responsibility
- Should provide the young person with a task that has integrity (i.e., is not "make-work") and thus reinforces the person's sense of dignity
- Should provide the young person with a "sense of competence and success"
- Must engage the student in reflection about his/her experiences (p. 40)

The Drum Circle model implemented in this study addresses each of these criteria. It is a model of hands-on learning-by-doing that immediately and easily engages students in a group learning process that is expressive musically, that teaches basic drumming skills, that encourages initiative-taking and leadership skills, and that provides successful experiences for every group member that are acknowledged and encouraged. Students are challenged to learn and to grow as individuals within a supportive environment. Reflection upon their experiences is an important part of the process.

The Drum Circle Model

Music therapists have been working with group drumming and percussion since the inception of music therapy. Generally speaking, music therapists are good facilitators of rhythm-based interventions, and understand their therapeutic benefits. Music Therapists are trained in how to integrate rhythm and drumming into approaches that generally combine the use of other instruments, such as piano, guitar, xylophones and other melody and percussive instruments. Singing is often done accompanied by percussion instruments and rhythm. While these approaches can utilize a great deal of rhythmic expression, they are quite distinct from the drum circle model.

This model had its inception in a movement that began to sweep North America in the early 1990s. The 'drum circle' movement has its roots in indigenous cultures such as West Africa, in which drumming in community with others has been widely and pervasively practiced for millennia. The drum circle movement is a cultural and social phenomenon whose inception in North America can be traced to a West African drummer named Olatunji (J. Rudell, personal communication, October 20, 2005). Olatunji came to the U.S. in the 1960s, and began in the 1980s to inspire

large groups of people to drum together. Most typically, a drum circle consists of a group of people who are all playing either a drum or a smaller percussion instrument. The most common drum used is a West African djembe drum. These drums are preferred because they are easy to play, carrying a large drumhead, and make a big, resonant sound. Drum Circles are usually facilitated by one or two people, who conduct the group in playing together in various ways. A Drum Circle 'philosophy' has arisen as part of the Drum Circle movement, which embraces the fostering of community expression, the joy of making music in the moment in community, and the honoring of each individual within the circle as an important contributor to the whole (Hull, 2006, Stevens, 2003, J. Price, personal communication, February 4, 2004).

Music therapists have pursued knowledge about drum circles and their therapeutic benefits through exposure to world-class facilitators like Arthur Hull and Christine Stevens, who have been presenting at music therapy conferences in the U.S. and Canada for some years. Christine Stevens, who is also a music therapist, began offering a training through Remo Drums called "*HealthRhythms*" to train individuals to be drum circle facilitators with a focus being on small groups with a therapeutic focus. Some music therapists have taken this training, while others have trained with facilitators like Arthur Hull. Drum circle facilitation remains a specialized training that music therapists continue to seek outside of regular academic curriculums.

As an evolving music therapy model that is still relatively new to the field, the Drum Circle or drumming group inspired by the Drum Circle model, is undergoing a period of experimentation and expansion in terms of approaches, populations and settings in which it is applied. Some music therapists and drumming facilitators have created groups focused on a teaching model, in which clients learn World Music rhythms through ensemble playing (Bernstein, 1999; Longhofer, 1993). Others refrain from teaching rhythms and remain closer to mainstream community-oriented drum circle practice in that sense (Stevens, 2003, Bittman, 2003, Blackett & Payne, 2005). Yet another group of practitioners focus on more of a process-oriented improvisational model of group drumming with no pre-determined protocol or procedures (Bensimon, Amir & Wolf, 2008).

LITERATURE REVIEW

There is an enormous amount of anecdotal evidence suggesting that group drumming interventions have many therapeutic benefits (Friedman, 2000; Belli, 2001; Brus, 2005; Longhofer, 2005). The number of research studies remains small, and no substantial studies have been conducted with youth-at-risk.

Bittman, Dickson & Coddington (2009) conducted a randomized controlled crossover study using group drumming with inner city adolescents attending a court-referred residential treatment program. They evaluated the effectiveness of the intervention as a catalyst for nonverbal and verbal disclosure leading to improvements in quality of life for inner-city youth in a court-referred residential treatment program. A total of 52 adolescents participated in the study, ranging in age from 12-18 (mean age 14.5). The following measures were used: the Child and Adolescent Functional Assessment Scale (CAFAS), the Adolescent Psychopathology Scale (APS), the Adolescent Anger Rating Scale (AARS), the Reynolds Adolescent Depression Scale, 2nd edition (RADs 2), and the Adolescent Visual-Analog Recreational Music Making Assessment (A-VARMMA). Statistically significant improvement was achieved in multiple areas including school/work role performance, total depression, anhedonia/negative affect, negative self-evaluation, and instrumental anger. Extended impact (6 weeks later) was found in multiple areas as well.

Bernstein (1999) reported on a group drumming intervention with at-risk, adjudicated youth at an alternative high school in the U.S. Meeting for sixteen 90-minute sessions over 8-weeks, the group was co-led by Bernstein, a music therapist, and a performing artist specializing in West African drumming traditions. The groups were taught West African rhythms with multiple parts, and the culmination was a performance in the school, and three different elementary schools. A 25-item survey was developed by Bernstein and the school district's art chair to measure Self-Esteem and Sense of Community/Belongingness. It was administered four times during the 8-week period as a pre/post measure. Statistical significance was reached, but attendance was inconsistent, making data scores less reliable. The author suggests that the scores point to a shift in self-concept that could be related to the drumming intervention. less

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Wyatt (2000) conducted an experimental study of the effects of group drumming on self-esteem and peer relationships among high school students. Twenty students participated in ten 55-minute sessions, twice weekly for six weeks, and 19 students were assigned to a control group. The Rosenberg Self-Esteem Scale (RSE) and the Index of Peer Relations (IPR) were administered pre- and post- the six week intervention, but significance was not reached. Exit interviews revealed that 13 students (N=20) stated they felt better about themselves after participating in the sessions.

Blackett & Payne (2005) explored group drumming with day-treatment substance abusers using questionnaires, attendance summaries, participant journals and semi-structured interviews. The latter were analyzed to identify themes in the “lived experience of drumming” (p. 479). The group met weekly for one hour over seven weeks and used the *HealthRhythms* drumming protocol. The results indicate that participants considered the drumming intervention to be particularly useful for stress reduction and emotional release, and it also provided a positive social group experience.

Kaplan (2000) explored the short-term effects of group drumming on the mood, group cohesiveness and rhythm perception of undergraduate students. Self-report measures were completed by 304 male and female students (mean age=19 years). Group cohesiveness was operationalized as interpersonal attraction and task commitment. Significance was found for the mood-state scale of “Elation-Depression” and for Group Cohesiveness. The drumming sessions were also videotaped, and rated by expert observers. Evidence of an increase in musical cohesiveness was found.

A study conducted by the Holyoke group in Australia (2005) combined drum circles with cognitive behavioral training in work with boys aged 11-13. All of the research participants exhibited some alienation from school. Participation in the program reduced absenteeism rates significantly. Teacher and participant feedback showed a significant increase in the experimental group, in levels of group participation, emotional control, self-esteem, improved relationships with adults and

teachers, and improved relationships with peers in the experimental group than in the control group. In these areas, 73% improved their score compared to 43% of the control group.

Montello & Coons (1998) included group drumming as one of two music therapy interventions with children aged 11-14 diagnosed with emotional difficulties, in schools. Results suggest some promise in the areas of increasing the motivation to learn and reduction of hostility, although increases in hostility were found in group drumming with hyperactive children when this was the initial intervention. This latter finding is important information in planning specific music therapy interventions for these children.

Because of a paucity of studies indicating clear directions for future research measuring the effects of drumming in a variety of areas, particularly psycho-social, the present study was undertaken to explore what kinds of therapeutic benefits might result from a group drum circle conducted with at-risk adolescents in a school setting.

Study Setting, Participants

The setting for the study was a privately funded alternative high school in a metropolitan area of a large Canadian city. The school was very small, with just 20-40 students in attendance. The participants for this study consisted of the entire 11th grade class. Students were given the option of participating in the study, or they could remain in the group without participating. Out of eleven students, one student who entered the class several weeks after it began opted not to participate in the research. Thus, ten students participated in the study. The participants consisted of four girls and six boys, all between the ages of 16 and 17 years old. Many of the students came from troubled homes, with drug-addicted parents, or no parents at all. One girl lived with her grandmother, who occasionally kicked her out of the house. One boy had committed a crime, and spent his weekends in jail. He was also the father of a young child. The school was unusual in that it was a very loving, caring environment in which the principal and his wife, who also worked at the school, often took students on experiential learning expeditions into nature. Sometimes these were overnight experiences. They also had students to their house for dinner.

Procedure

The group was co-facilitated by the principal investigator, who is a seasoned music therapy clinician and researcher, and a professional

percussionist, Bruno Roy, who had been teaching students privately. A demonstration group was held to inform students about what would take place in the sessions. The first segment consisted of the drum circle; in the second, the research was explained and informed consent sought from the students for participation. Following this group, twelve weekly sessions lasting one hour each, ensued. They were included as part of the regular school day, and students were expected to attend regularly. No grades were given for the class. The title of the class was “The Drum Circle Project.”

The approach to this group combined elements of a teaching model with traditional drum circle elements. The group itself consisted each week of teaching basic hand-drumming techniques at the beginning of each session. The techniques were practiced through ‘warm-ups’ in which everybody played their own djembe drum. Rhythms were introduced after this, followed by other segments such as ‘call-and-response’ ‘drum dialogues’ or ‘drum battles.’ As the group progressed, participants were encouraged to come up with their own rhythms. One particularly successful segment involved two people leaving the room at a time to create one or two rhythms that they could then come back with to teach to everyone else. The ‘round robin’ was another segment that involved each person coming in one at a time with their own rhythm that had to blend with all of the previous rhythmic contributions of the group. The participants stopped playing one at a time to end this segment.

The leaders encouraged participants to express their creativity in the group, to learn basic hand-drumming techniques and rhythms, to feel good about their efforts and what they contributed, to take risks and try new things, such as leading the group by conducting; to respect each other, listen to each other and support each other, and to have fun.

Data Collection

Data collection was triangulated in the following manner: 1) 6 of the 12 sessions were videotaped by a professional videographer, and then subjected to musical and verbal analysis by the music therapist co-facilitator. An educational psychology researcher with extensive experience observing music therapy groups reviewed a portion of the tapes to verify the accuracy of the coding. 2) Written observations were made of each group by a different educational psychology researcher who also had extensive experience observing music therapy groups. This data

was coded for themes by a second researcher with the same background. 3) Questionnaires were administered to the research participants directly after the 12th (final) session of the group.

The Videotapes

Every other session was videotaped, with the exception of two sessions that were taped in sequence due to an illness that prevented the videographer from taping one session in the correct sequence. The procedure for analyzing the tapes was as follows: Each videotape was first coded by writing down observable behaviors on the part of participants and the co-facilitators. Musical expressions, 'behaviors' and events were coded, as well as verbal interactions between participants, and between participants and leaders. These codes were then collapsed into themes which were categorized under broader headings.

Researcher's Recorded Observations

The recorded observations made by the educational psychology researcher of each group consisted of a running record of events and actions and, as much as possible, the verbatim speech of the students (Creswell, 2005).

Questionnaires

Questionnaires were administered to the research participants directly after the 12th session of the group (Appendix 1). Students were told they could remain anonymous, but most surprised the researchers by voluntarily putting their names on the questionnaires. Apparently, they wanted us to know how they felt about the group.

RESULTS

Researcher's Recorded Observations

Table I shows the categories and themes developed from the researcher's recorded observations of the sessions.

Table I

Musical Themes:

Playing in sync
Playing out of sync
Disregard for structure
Enjoyment
Musical initiative
Musical disruption
Competition

Group Process

The Positives:

Group cohesion
Showing interest
Taking initiative
Positive self-statements
Positive peer interactions
Trying/perserverance

The Negatives:

Lack of respect for authority
Negative peer interactions
Negative attention-seeking behavior
Frustration with group
Lack of participation
Lack of confidence
Disinterest

Leader Tasks:

Leader tasks were not coded by the researcher.

Changes Over Time:

Increases in self-esteem
Increases in interest
Longer playing times

The following case studies were taken from the running records of four of the students:

1. Anne was a shy, quiet girl who consistently applied herself in the group to learning different rhythms. She did not easily learn what was being taught, nor did expressing her own creativity come easily. She was hesitant to express herself in the group's beginning, and often paused a long time before actually playing in her turn. However, her perseverance and willingness to keep trying appeared to pay off by apparent gains in brightening of affect and mood, less hesitancy in expressing herself, increased participation musically and verbally, and more assertiveness verbally in the group. The researcher noted her self-confidence improving, and observed her "hesitation diminishing a lot" by the group's end. It is something the group leaders noticed also. She appeared to enjoy the group a lot, and appeared to relax and smile more as the weeks progressed. Interestingly, the school principal inquired about how she was doing towards the end of the 12-week sessions, noting that she was not doing well in her other classes. I expressed surprise at this news, and reported that we were seeing improvements in Anne, and that she was doing very well in the drumming group.

2. John was a very outspoken, rather charismatic young man who took up a lot of space in the group. This is reflected in the volume of observation notes taken on him. He enjoyed being the center of attention, and enjoyed being provocative. He did not like the discipline of repetition, always seeking to do something new. In the group's beginning, he was the class clown, relishing the attention he got from making people laugh. When the group began to shift into a mode requiring more discipline, he withdrew at first, and acted bored and tired. Attention was erratic in most groups, with little ability developed to sustain focus beyond a particular segment John was truly excited about. Interestingly, what emerged as the group progressed was his inability to take compliments and praise for his playing. Encouraging his capacity to accept positive feedback for gains he made in the group became an important focus in working with him.

3. Julie was a talented drummer who had had previous experience playing a djembe. She loved to play, this was obvious from the smile she so often had while playing. She said that the drum circle group was the best part of her day. She was intent on learning as much as she could, and playing as much as she could, and often appeared frustrated with members of the

group who were causing disruptions to the focus and concentration of others. In one group the researcher notes: "Julie and (another member) seem very disgusted by the arguing and the fact that they won't be playing." In another session she complained about the immaturity of the group, but said they still had fun, so it was okay. Julie was acknowledged by others as being the one to beat in drum battle competitions, but was humble about her skills. Once she passed on taking her turn, and another group member commented that she didn't participate because she didn't want to "show everyone up because she is so good." She would sometimes try to help someone sitting next to her, play a particular rhythm.

4. Tom was a relatively soft-spoken young man who had a nice smile. He had a good sense of humor, and liked to laugh. Tom demonstrated some natural talent rhythmically, expressing an ease and fluidity in his playing that was impressive. Yet he did not appear comfortable in being acknowledged or 'seen' in this capacity, as praise seemed to result in a diminishment of his expressivity and skill, with the ensuing sense that he was hiding from himself, his capacities and his potential. One could not help wondering, what had happened to make him so afraid? In the times when he would allow himself to enthusiastically participate in the group, exert effort and enjoy himself, he would light up the room with his smile and joy. In positive sessions like these, he would support others through praising their efforts, or exhort others to listen and respect the co-facilitators. In other sessions, he would appear apathetic, participate sporadically, and sometimes disrespect the facilitators. This 'up and down' pattern persisted throughout 12-week sessions.

Videotapes

Table II shows the categories and themes developed from the observations of the videotapes of the sessions.

Table II

Themes:

Musical Themes:

Playing in synchrony
Playing out of synchrony
Pushing the speed
Pushing the volume
Mirroring
Creative Expression
Competition

Group Process:

The Positives:

Group cohesion
Focusing well
Enjoyment
Volunteering/Initiating
Exerting effort
Positive Peer Interactions

The Negatives:

Lack of focus
Lack of respect
Lack of participation
Negative peer interactions
Negative attention-seeking behavior
Frustration with group

Leader Tasks:

Teaching
Enforcing (ground rules/discipline)
Encouraging (creativity, risk-taking, initiating behaviors)
Praising
Confronting (self-denigrating behaviors)
Discussing

Changes Over Time:

Longer playing times
Less hesitancy

More creativity
Increased participation
Increased assertiveness

Questionnaires

Table III shows the results of the questionnaires. The “Median” refers to the average score number for each response item.

Table III

- 1- strongly disagree**
- 2 - somewhat disagree**
- 3- not sure**
- 4 - somewhat agree**
- 5- strongly agree**

Statement	Median
1. I enjoyed this group.	4.7
2. I learned some basic drumming skills.	4.5
3. The class was taught well.	4.5
4. I was encouraged to express my creativity.	4.5
5. I learned something about myself in this group.	3.4
6. This group helped me.	3.9
7. I was afraid to stand out in this group.	2.7
8. I felt supported by my peers in this group.	3.8
9. I was afraid of being criticized by my peers.	2.5
10. I enjoyed doing solos.	3.3
11. I feel better about myself after being in this group.	4.1

Please check any of the following that the group may have helped you with:

[Categories of response]	Number of responses
stress	5
anger	5
frustration	2
depression	2
insecurity	3
difficulty concentrating	2
low energy	3
lack of motivation	5

If any of the following applies to you, please check:

The drumming group helped me to feel:

[Categories of response]	Number of responses
better about myself	1
happier	3
more energetic	1
more motivated	1
better able to concentrate or focus	1
less hostile	2
more open	7
more confident	5
calmer	3

Individual Comments From the Questionnaires:

“It lessened my hyper-ness and enabled me to be calmer.”

“It helped me be more creative and more confident.”

“It helped me be more comfortable standing out in a group. It helped me relax and “beat” away my problems!”

“It helped me be a little more open.”

“They made us feel like we were really good; always made us feel like we can do it. It made me feel like you can do anything.”

“It helped me be happier because sometimes on the weekend I get angry when my football teams lose. I express my anger on the drum; it helps me forget.”

DISCUSSION

Questionnaires

In a qualitative study, the “voices” of the research participants are extremely important. In this case, the students seemed to want to take ownership of their answers, for almost all of them put their names at the top of the questionnaires, though it was explicitly stated more than once that the questionnaires could be anonymous. This suggests that they took the process seriously, and that they wanted the researchers to know their individual responses to the class.

A couple of answers on the multiple-choice part of the questionnaire were surprising to my co-leader and me. Seven out of ten students reported feeling somewhat supported by their peers, with one student saying they felt strongly supported. We had expected more people to feel unsupported given the number of critical comments of each other we heard in the group. We also expected more students to be afraid of being criticized by their peers (statement #9), but two strongly disagreed that they were, and four somewhat disagreed.

Seven out of ten students either strongly agreed (four) or somewhat agreed (three) that they felt better about themselves in the group. This was rewarding feedback. In terms of the second part of the questionnaire, where students used check marks to indicate choices, we were surprised that “lack of motivation” ranked along with “stress” and “anger” as something students thought the group may have helped them with, as this is not an effect commonly cited in the literature with this population. This is important information, because if a group drumming intervention can increase motivation among at-risk youth in school, this can potentially decrease rates of absenteeism and drop- outs, and increase levels of academic performance. Also of interest was that “more open” received the most marks (seven) in terms of a response to “The drumming group helped me to feel” as this has not been cited in the literature specific to at-risk youth. Feeling “More confident” came in second, with five students checking it off.

The Videotapes

The themes identified from the coding of the videotapes help to clarify and put into focus, key elements of the drumming circle process that occurred over the course of the twelve weeks of sessions. Looking at

“Musical Themes” that emerged, “Playing in synchrony” and “Playing out of synchrony” are two key areas. One student in particular, continually sought to ‘break’ the musical synchrony of the group, by either “pushing the speed” or “pushing the volume”, two other themes. It also takes considerable focus of attention to sustain playing in synchrony. Often, the group would attain synchrony, and then lose it when someone lost their focus and began to play a beat that was contrary to the group’s. On several occasions, the group attained perfect synchrony for brief periods of time. These moments could be characterized as peak experiences in the group. Interestingly, “Competition” emerged as a theme in the group, which elicited tremendous excitement and energy on the part of many group members. The students came up with the idea to do “drum battles”, as opposed to “drum dialogues” which the co-facilitators had in mind. These were usually fierce competitions in which students would face off one another to see who could play the best. The drum battles seemed to offer group members the opportunity to express intensely aggressive impulses within the safe framework of a drumming ‘game’. Tremendous enthusiasm was generated in the group from these contests, and great fun had in the process, with much laughter and cajoling.

In terms of “Changes Over Time”, themes grouped in this area were “Longer playing times,” “Less hesitancy,” “More creativity,” “Increased participation” and “Increased assertiveness.” The latter refers to larger numbers of students engaging in segments requiring them to play alone, as opposed to all together. In the beginning of the group, many people chose not to do this, but as the sessions progressed, these numbers increased dramatically. “More creativity” relates to this theme, as solo expressions usually involved students having to come up with their own rhythms in some form. Greater numbers of students were able to express their own creativity as the group progressed, and their creative expression became more developed and more interesting musically, in some cases over time. “Less hesitancy” refers to hesitancy to respond by offering a musical expression or response. Some individuals in the beginning of the group were very slow to respond. These response times speeded up as the group progressed. “Longer playing times” refers mainly to the group’s ability as a whole to sustain their focus for longer periods of time as the group progressed. Increased assertiveness refers to both musical and verbal self-expression. As the field of music therapy continues to advance in theory and practice, changes in musical expression observed over the course of a music therapy process such as this one, become important data

as we evolve towards increasing knowledge of what actually transpires musically, in the course of our work.

In terms of psychological correlates, each of these themes suggest at least the possibility of reflecting a greater degree of self-confidence in group members. Also, an increasing comfort level and mastery with their instruments is also suggested. Another possibility is a greater degree of 'openness' being experienced by group members towards each other and the group leaders, which could contribute to some or all of these musical changes observed. 'Openness' may well be connected to increases in self-confidence (examining this question alone could be the subject of a further study, given the numbers of students checking this as something the group helped them feel).

The Observation Notes

The themes coded from the observation notes shared many similarities with those coded from analysis of the videotapes of the sessions in every category, which is clear from a comparison of Tables I and II. Discussions between researchers revealed that sometimes, different titles referred to the same observed behaviors. For example, under "Musical Themes" in Table I, "Disregard for structure" contained the themes of "Pushing the speed" and "Pushing the volume" found in Table II. "Mirroring" and "Creative Expression" under "Musical Themes", and "More creativity" under "Changes over Time" were noted by the music therapy facilitator but not by the educational psychology researcher. I believe the reason this occurred was because the latter was not a musician, and musical mirroring and levels of creativity are difficult for a non-musician or non-music therapist to identify in musical expression.

Under "Group Process": "*The Positives*", the educational psychology researcher included "Showing interest" (Table I), which is most closely expressed in Table II by the music therapist as "Enjoyment" and "Exerting effort". Also, "Trying/Perserverance" in Table I is very close to "Exerting effort" in Table II.

Under "Changes Over Time" (Table I), the educational psychology researcher listed "increases in self-esteem" and "increases in interest" as themes, which the music therapist did not. However, the themes of "less hesitancy", "more creativity" and "increased assertiveness" that the latter listed (Table II), are arguably related quite closely to this theme.

“Increased participation” listed by the music therapist, is also quite similar to “increases in interest”.

What the observation notes provided that the videotapes could not, was a more complete picture of the progress of each individual student through the course of the entire study. Also, an observer of any group is able to see many interactions that the facilitators of a group can miss because the observer’s focus is not split between observing and leading the group. A plethora of detailed observations made for a rich source of data on each session of the study.

At the end of the 12-week sessions, the educational psychologist recording the observations expressed the opinion that two of the girls in the group seemed to have benefitted the most in terms of observable, therapeutic change. The recorded observations confirm this assessment. Positive behaviors and changes over time were seen in the following ways: They consistently exerted effort, showed interest, took risks, and demonstrated increasing levels of self-esteem and assertiveness. All females in the group consistently contributed to group cohesion and positive peer interactions. They strived to play in sync with the group, and followed the structure given by the co-facilitators. They were unfailingly respectful of the facilitators, and of each other.

A trend observed among many of the males in the group was inconsistency in their attention and performance from week to week. The gains observed in one week, such as with focus of attention, exerting effort and taking initiative, and positive peer interactions, would often disappear in the following week, only to return in a later session. These ups and downs are very clearly recorded in the recorded observations. The reasons for this, however, are not clear. A sense I had in being in the group was that no one wanted to stand out from the others. Could this have contributed to a reluctance to consistently apply oneself and perform well? Further study is needed of this issue.

Two male students expressed a consistent trend of attempts to disrupt the cohesion of the group, both musically and verbally. This is reflected in the recorded observations and videotapes. One of these students, who had ADD, was extremely critical of others in the group, and had a difficult time remaining focused for any length of time. He had great difficulty playing most rhythms, and often broke the musical synchrony of the group. The other student was younger and smaller than the other

males, and was singled out for criticism and ridicule by the others at times. He responded by engaging in negative attention-seeking behaviors throughout the group.

Positive trends observed in a majority of the students are noted in “Changes Over Time” in Tables I and II. Regarding musical expression, longer playing times (both Tables), less hesitancy and more creativity (Table II) stand out as significant observable changes.

One of the interesting aspects of this study was the opportunity to discover differences between how a teacher/professional percussionist would lead a group, versus a music therapist, and to compare the strengths and weaknesses of both approaches in terms of the population. One of the enabling factors of Bruno being a teacher (the term ‘enabling’ in qualitative research referring to a factor that assists or helps a study) was his experience with enforcing discipline and maintaining control of the ‘classroom’. This was a huge advantage, given the enormous behavioral challenges of working with at-risk youth. Bruno was used to being in charge, and telling students what to do. He was obviously at ease with this role, and with the population as well. As a therapist not used to this population, I was unprepared for the degree of challenge with regard to keeping control of the group. I had not learned approaches to maintaining control of a class, and dealing with issue concerning discipline, that teachers learn as part of their training. My lack of comfort and ease with what for me was a new population, contributed to my ineffectiveness at times, in addressing disruptive behaviors.

On the other hand, an enabling factor in this study in terms of therapeutic impact was definitely my training as a therapist. Whereas Bruno’s focus was on helping students attain mastery of techniques and beats, my focus was on maximizing the therapeutic benefits of the group. Here is an entry I made in my own process notes on November 17th, after session #8:

I notice that I am much more tuned in to self-esteem issues than Bruno. I have been very aware and concerned over the last two weeks that P. and S. have not been feeling good about their playing. I’ve made efforts to affirm them where possible. But Bruno in feedback to P. said something that a teacher would, focusing on improving her playing. This did not help her self-esteem. The same thing for R.; he looked pleased with a

rhythm he'd come up with last group, but Bruno said, "It's not steady," whereas I would have at least praised him first. His affect fell a little after Bruno's statement. I would not have used that approach.

We spoke about these incidents in our processing of the groups, and I asked Bruno to be more careful when he made these interventions, preceding instruction with praise for efforts.

Another area of difference between us lay in my emphasis upon encouraging creative self-expression musically, whereas Bruno was accustomed to emphasizing the teaching of specific rhythms that did not stem from the students' own expression. However, he was very open to all of the segments focusing on creativity, and seemed to welcome this expansion of his own perspective. I suppose it's a bias of mine, as yet unproven in research (to my knowledge), that the expression of individual creativity is a greater booster of self-esteem in music therapy than mastery of something already composed.

My recommendation to other music therapists wanting to work with this population in schools is that they invest in a teacher-training course, or mentor with someone able to teach them the skills that teachers learn, to maintain control of a class. This would of course include how to deal with specific behavioral issues. It should be said that not every teacher who has this training, succeeds in working well with at-risk youth. It is a very challenging population to work with, and my own experience with working in two alternative high schools is that some teachers are gifted with the ability to maintain complete control of their class, thus providing the optimum learning environment, whereas others are sometimes brought to tears through failing at this, despite their training. Let it also be said that when I speak of control, this does not preclude having fun, being creative or empowering students to let their voices be heard.

Another recommendation is that when music therapists collaborate with teachers or teacher/musicians in running groups, that they discuss in advance their differences in approach. If therapeutic goals co-exist with teaching goals, as occurred in our group, it's important for music therapists to insure that the teaching does not interfere with or in some cases prevent, the attainment of a therapeutic outcome. On-going

dialogue may be necessary to insure the harmonization of approaches throughout the group process.

Contraindications

I would sound a cautionary note to music therapists and other group leaders considering the inclusion of students with *severe* ADD or ADHD to a small or medium-sized drumming group in which there is a lot of interaction among participants, and where the group is not focused exclusively on an ADD or ADHD population. The individual in our group presenting with this condition had such difficulty focusing, that his inclusion presented constant challenges to the group. His remarks to others were often hostile, which is interesting in light of Montello and Coons's (1998) finding that an increase in hostility was found in hyperactive children who engaged in drumming. It raises the question of whether participation in drumming for this individual might also increase his level of hostility. More research is clearly needed in this area.

CONCLUSIONS

What were the therapeutic benefits to the drum circle conducted with at-risk adolescents in this study? A majority of students reported feeling better about themselves, and that the group helped them to feel more open. Half of the students reported that the group may have helped them with stress, anger and lack of motivation, as well as self-confidence. The themes emerging from the videotapes identified areas of musical change over time, which included longer playing times, less hesitancy, more creativity, increased assertiveness, and increased participation. Themes in the same category from the recorded observations were: Increases in self-esteem, increases in interest, and longer playing times. Case studies of some of the students suggested therapeutic gains in self-confidence and self-esteem. My own observations during the groups supported those of the case studies.

One cannot make generalizations from a qualitative study, but the conclusions can help shape the focus of future studies. Based on the analysis of the data in this study, recommendations for future quantitative studies with at-risk youth would be to include measures for stress reduction, anger management and reduction, and measures of changes in self-confidence, motivation and 'openness'. Bittman, Dickson & Coddington (2009) have just completed such a study with a delinquent

youth population, which is an important beginning. Further study is also needed to identify the most effective kinds of drum circle models for this population. Based on my own experience, I would recommend a focus on generating rhythms through the creative self- and group-expression of rhythm. This is because of the difficulty some students had in learning even simple rhythms taught by the co-facilitators. I believe a semi-structured approach in the spirit of Stevens' work (2003) would harmonize well with the needs of at-risk students in alternative schools. I would also recommend the incorporation of a wider variety of percussion instruments in the sessions. We introduced small percussion instruments in one or two sessions, but wider inclusion of these instruments could assist those students who were particularly challenged by playing rhythms on the djembes.

Qualitative studies can also contribute to an enhanced understanding of issues involved in the practice of a particular approach. Based on my own experience with this study, I would recommend to other music therapists wanting to work in school settings for the first time, to come equipped with some knowledge of how teachers in that school, or with that population, handle behavioral and discipline issues. What may work in a clinical setting does not necessarily work in a school setting, and it is important to harmonize one's approach with the culture in which one is operating, provided it is humane and healthy.

Appendix 1

Feedback Questionnaire for Drumming Circle Group

Please circle a number to the right of each question, according to the following code:

- 1 - strongly disagree
- 2 - somewhat disagree
- 3 - not sure
- 4 - somewhat agree
- 5 - strongly agree

- | | | | | | | | |
|---|---|---|---|---|---|---|---|
| 1. I enjoyed this group. | - | 1 | 2 | 3 | 4 | 5 | + |
| 2. I learned some basic drumming skills. | - | 1 | 2 | 3 | 4 | 5 | + |
| 3. The class was taught well. | - | 1 | 2 | 3 | 4 | 5 | + |
| 4. I was encouraged to express my creativity. | - | 1 | 2 | 3 | 4 | 5 | + |
| 5. I learned something about myself in this group. | - | 1 | 2 | 3 | 4 | 5 | + |
| 6. This group helped me. | - | 1 | 2 | 3 | 4 | 5 | + |
| 7. I was afraid to stand out in this group. | - | 1 | 2 | 3 | 4 | 5 | + |
| 8. I felt supported by my peers in this group. | - | 1 | 2 | 3 | 4 | 5 | + |
| 9. I was afraid of being criticized by my peers. | - | 1 | 2 | 3 | 4 | 5 | + |
| 10. I enjoyed doing solos. | - | 1 | 2 | 3 | 4 | 5 | + |
| 11. I feel better about myself after being in this group. | - | 1 | 2 | 3 | 4 | 5 | + |

Is there anything you would change about the group?

What did you like the most? _____

What did you like the least? _____

Please check any of the following that the group may have helped you with:

- stress
- difficulty concentrating
- low energy
- lack of motivation

If any of the following applies to you, please check:

The drumming group helped me to feel:

better about myself

happier

more energetic

more motivated

better able to concentrate or focus

less hostile

more open

more confident

If the group helped you in any way, could you describe here in more detail:

Would you sign up for this class again in the future? yes no

Would you recommend it to other students? yes no

Additional Comments: _____

Appendix II

Additional References

Two studies were found that sought to measure psychosocial responses to group drumming interventions alone. However, both studies came up short of any significant results. The references are listed below here separately from the other references cited for this paper, as they would not ordinarily be included:

- Koebel, C. A. (2002). *The effects of group drumming on selected neuroendocrine levels and self-mood, stress, socialization and transpersonal experiences*. (Master's Thesis, Michigan State University), AAT 1409523, 84.
- Roskam, K. Sherwood (1995), Music making as therapy at Harbor View Adolescent Center. *Think Drums*, Hollywood, CA: Remo, Inc.

References

- Belli, Remo D. (2001). Drumming the future is in your hands. *Teaching Music*, 9(3).
- Bensimon, B., Amir, D., Wolf, Y. (2008). Drumming through trauma: Music therapy with post-traumatic soldiers. *The Arts in Psychotherapy*, 35, 34-48.
- Bittman, B., Dickson, L., and Coddington, K. (2009). Creative musical expression as a catalyst for quality-of-life improvement in inner-city adolescents placed in a court-referred residential treatment program. *Advances*, 24(1).
- Bittman, B., Berk, L., Felton, D., Westengard, J., Simonton, C., et. al., (2001). Composite effects of group drumming music therapy on modulation of neuroendocrine-immune parameters in normal subjects. *Alternative Therapies*. 7(1), 38-47.
- Blackett, P., & Payne, H. (2005). Health rhythms: A preliminary inquiry into group-drumming as experienced by participants on a structured day services programme for substance-misusers. *Drugs: Education, Prevention and Policy*, 12(6), 477-491.
- Brus, B. (2005). African hand drumming workshops held across the country help participants reduce work stress. *Journal Record*. Oklahoma City, OK.
- Camilleri, V. (2002). Community building through drumming. *The Arts in Psychotherapy*, 29(5), 261-264.
- Chacona, S. (2007). Effect of world music drumming on auditory and visual attention skills of ADHD elementary students (Doctoral dissertation, Lynn University). Proquest Dissertations and Theses. Section 1381, Part 0522, 242.
- Colle, L. (2004). Lecture, McGill University.
- Creswell, J. (2005) *Educational research: planning, Conducting, and evaluating quantitative and qualitative research*. Upper Saddle River, NJ: Pearson.
- Druian, G., Butler, J.A. (1987). *Effective Schooling Practices and At-Risk Youth: What the research shows*. Office of Educational Research and Improvement (OERI), U.S. Department of Education.
- Freudenberg, N. & Ruglis, J. (2007). Reframing school dropout as a public health issue. *Preventing Chronic Disease*, 4(4). Retrieved June 7, 2008, from http://www.cdc.gov/pcd/issues/2007/oct/07/_0063.htm

- Friedman, R. (2000). *The Healing power of the drum*. Reno, NV: White Cliffs Media.
- Hull, A. (2006). *Drum circle facilitation: Building community through rhythm*. Santa Cruz, CA: Village Music Circles.
- Longhofer, J. (1993). African drumming and psychiatric rehabilitation. *Psychosocial Rehabilitation Journal*, 16(4), 3.
- Montello, L., Coons, E. (1998). Effects of active versus passive group music therapy on preadolescents with emotional, learning, and behavioral disorders. *Journal of Music Therapy*, 35(1), 49-67.
- Slotoroff, C. (1994). Drumming technique for assertiveness and anger management in the short-term psychiatric setting for adult and adolescent survivors of trauma. *Music Therapy Perspectives*, 12, 111-116.
- Stevens, C. (2004). Group drumming: A rational strategy for whole person care. *Paradigm Magazine*, 9(1) & 7(4).
- Stevens, C. (2003). *The art and heart of drum circles*. Milwaukee, WI.: Hal Leonard.
- Wehlage, G. (1983). Effective programs for the marginal high school student. *PDK Fastback 197*. Bloomington, IN: Phi Delta Kappa Educational Foundation.
- Wheatbelt Community Drug Service Team (2005). *Drumbeat - Northam Summative Evaluation*. Northam W.A., Australia: Holyoake.
- Wyatt, J. (2000). Drumming for violence prevention: The effects of group music therapy on self-esteem and peer relationships in high school students. (Unpublished masters thesis, Michigan State University, 2000). Publication Number: AAT 1399694, 75.

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